

LEWIS COUNTY

COMMUNITY DEVELOPMENT DEPARTMENT

2025 NE Kresky Avenue  
Chehalis, WA 98532-2626

(360) 740-1146  
FAX: (360) 740-1245

Fee for Appeals: \$730.00

Legal notice publication fee: \$250.00

APPEAL OF HEARING EXAMINER DECISION

Name of Applicant/Owner:

Address:

Telephone #:( ) - E-Mail:

Specific identification of Hearing Examiner decision order being appealed (permit, decision, determination or other action):

Attach copy of written decision

Specific section of the Lewis County Code which authorizes appeal:

Specific grounds for petition, concise statement of the factual reason for the appeal, and identification of the policies, statutes, codes or regulations that the petitioner claims are violated:

Name and address of Petitioner	Attorney for Petitioner (if applicable):
Daytime Phone #:( ) -	Daytime Phone #: ( ) -
E-Mail:	E-Mail:

Signature of Petitioner

Signature of Attorney

Date forwarded to Hearing Examiner: / /

Copy sent to Appeals Coordinator: / / Original sent to

Date Received:	By:
Fee Paid: \$	Receipt #:
Tax Parcel #:	Project/Activity: